JAN 0 9 2003

TECH CENTED 17 2018/06 (08-00)

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OR

TOTAL

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PATENT APPLICATION FEE DETERMINATION RECOI							RD	Application or Docket Number					
								GNVPN.19BUSA					
		C!		S AS FILED (Column 1)	- PART		olumn 2)		SMALL	ENTITY	OR	OTHER SMALL	THAN ENTITY
FOR		1	NUMB	BER FILED		NUMBE	NUMBER EXTRA		RATE	FEE	7	RATE	
(3	ASIC FEE 37 CFR 1.16(a))									s	OR	,	s
	TAL CLAIMS 7 CFR 1.16(c))		minus 20 =			. *			x \$ =	**	OR		**
IND	DEPENDENT CL 7 CFR 1.16(b))	AIMS		m'	inus 3 =	*		1	x =		OR	.	=
	ULTIPLE DEPE	NDENT CL	AIM PR	ESENT ((37 CFR 1.16(d	d))		1		- 	-{	.	
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▼ 11 tt	he difference in colu								TOTAL	· L	OR	TOTAL	
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)				(Column 3)	- ,	SMALL	ENTITY	OR	OTHER T			
AMENDMENT A		CLAIN REMAIN AFTE AMENDN	NING ER		NU PREV	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total (37 CFR 1.16(e))	*		Minus	**		=	7 [x \$=		OR	x \$ =	
4ME	Independent (37 CFR 1.16(b))			Minus	***		=][x=		OR	x=	1
Ĺ	FIRST PRESENTATION OF MULTIPLE DEP				PENDEN	l Claim	(37 CFR 1.16(d))][+=	:	OR	+ =	
	•	(Column	ı 1)		(Column 2)		(Column 3)	ADI	TOTAL DIT. FEE		OR _A	TOTAL ADDIT. FEE	
AMENDMENT B		CLAIN REMAIN AFTEF AMENDM	NING R		NUN PREVI	GHEST IMBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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AME	Independent (37 CFR 1.16(b))	*		Minus	***		=] x	· =		OR OR	x =	
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		(Column 1	1)		(Colum	ımn 2)	(Column 3)	AD	TOTAL DIT. FEE		OR Al	TOTAL DDIT. FEE	
MENDMENT C	***************************************	CLAIM REMAINI AFTER AMENDM	IING R		NUM PREVIO PAID	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	18		Minus	** 20)	= _O	x	\$=			x \$=	,
ME	Independent (37 CFR 1.16(b))	* 5		Minus	*** 3		= 2	x	.94 =	168	OR	x =	

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is stimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

(37 CFR 1.16(d))

PTO/SB/17 (10-01)

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EE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

(a) 918.0	OTAL AMOUNT OF PAYMENT	(\$)	918.00
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Complete if Known					
Application Number	09/242,977				
Filing Date	02/26/1999				
First Named Inventor	James M. Wilson et al				
Examiner Name	R. Shukla				
Group Art Unit	1632				
Attorney Docket No.	GNV19BUSA-RCE				

METHOD OF PAYMENT	FEE CALCULATION (continued)				
The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:	3. ADDITIONAL FEES				
Deposit Account 08-3040	Large Small Entity Entity				
Number	Fee Fee Fee Fee Foo Decaring	Fee Deid			
Deposit Account HOWSON AND HOWSON	Code (\$) Code (\$) Fee Description	Fee Paid			
Name	105 130 205 65 Surcharge - late filing fee or oath				
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	127 50 227 25 Surcharge - late provisional filing fee o cover sheet	卫			
Applicant claims small entity status. See 37 CFR 1.27	139 130 139 130 Non-English specification	立			
2. Payment Enclosed:	147 2,520 147 2,520 For filing a request for <i>ex parte</i> reexaminating 112 920* 112 920* Requesting publication of SIR prior to	2			
Check Credit card Money Order Other	Examiner action	0			
FEE CALCULATION	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action	2			
1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month	03			
Large Entity Small Entity Fee Fee Fee Fee Description	116 400 216 200 Extension for reply within second month				
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	117 920 217 460 Extension for reply within third month	8			
101 740 201 370 Utility filing fee	118 1,440 218 720 Extension for reply within fourth month				
106 330 206 165 Design filing fee	128 1,960 228 980 Extension for reply within fifth month	11			
107 510 207 255 Plant filing fee	119 320 219 160 Notice of Appeal				
108 740 208 370 Reissue filing fee	120 320 220 160 Filing a brief in support of an appeal				
114 160 214 80 Provisional filing fee	121 280 221 140 Request for oral hearing				
SUBTOTAL (1) (\$)	138 1,510 138 1,510 Petition to institute a public use proceeding				
2. EXTRA CLAIM FEES	140 110 240 55 Petition to revive - unavoidable				
Fee from	141 1,280 241 640 Petition to revive - unintentional				
Total Claims 7 20** = 0 X Below Fee Paid	142 1,280 242 640 Utility issue fee (or reissue)				
independent 5 000 1000 1000 1000 1000 1000 1000 10	143 460 243 230 Design issue fee				
Claims	144 620 244 310 Plant issue fee				
· · · · · · · · · · · · · · · · · · ·	122 130 122 130 Petitions to the Commissioner				
Large Entity Small Entity	123 50 123 50 Processing fee under 37 CFR 1.17(q)				
Fee Fee Fee Fee Description Code (\$) Code (\$)	126 180 126 180 Submission of Information Disclosure Stmt	[
103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)				
102 84 202 42 Independent claims in excess of 3	146 740 246 370 Filing a submission after final rejection	11			
104 280 204 140 Multiple dependent claim, if not paid	(37 ČFR § 1.129(a))				
109 84 209 42 ** Reissue independent claims over original patent	examined (37 CFR § 1.129(b))				
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	179 740 279 370 Request for Continued Examination (RCE)	750.00			
and over original patent	169 900 169 900 Request for expedited examination				
SUBTOTAL (2) (\$) 168	of a design application Other fee (specify)	 [
**or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 75	0.00			

SUBMITTED BY Complete (if applicable) Name (Print/Type) Cathy A. Kodroff Registration No. 33,980Telephone 215-540-9200 Signature 01/03/2003

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